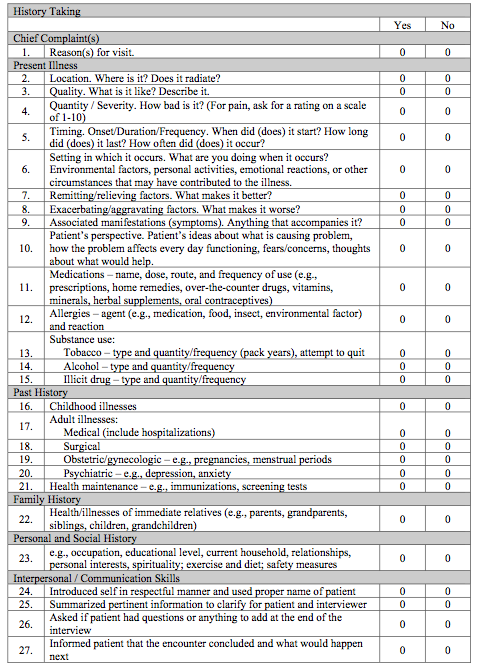
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**VITALS**

1. Wash Hands
2. Palpate radial pulses (15 seconds)
3. Measure BP (MAKE SURE YOU CHECK PULSE FIRST)

**HEAD AND NECK AND CRANIAL NERVES**

1. Inspect Scalp
   1. “Any changes in hair quality? And bumps or redness?”
2. Inspect Lid, cornea, conjunctivae
3. Estimate Visual acuity bilateral, covering one eye at a time—use Eye chart –CN II
   1. “Any changes in vision they’ve noticed?”
4. Check visual fields by confrontation
5. H-test—CN III, IV, VI
   1. “Follow my finger keeping your head straight using only your eyes”
6. Observe bilateral pupillary responses to light
7. Use ophthalmoscope to examine each eye
8. Examine out ears bilaterally
   1. “Any drainage?”
9. Test auditory acuity
10. Use tuning fork to do Rinnes and Weber—CN VIII
    1. “Let me know if you can hear it and when you stop hearing it. Then ill place it in front of your ear and make sure you can still hear it.”
    2. “I’m going to place this on your head and let me know if you can hear it equally in both ears”
11. While you have the tuning fork place it on the medial malleolus of the tibia and ask the patient if they can feel it bilaterally
12. Inspect ears with otoscope
13. Ask if they’ve had any changes in smell—CN I
14. Inspect turbinates and septum of the nose with otoscope
15. Inspect Lips, gums, teeth, and buccal mucosa, palate, uvuvla, pharynx, and tongue
16. Observe elevation of palate by asking patient to say “ah”
17. Midline protrusion of tongue—CN XII
18. Ask patient to puff out cheeks, show their teeth, raise their eyebrows, and close eyes shut tightly—CN VII
19. Ask patient to open their jaw wide –CN V
20. Grab a cotton ball and ask patient to CLOSE EYES. Then ask them to tell you if they feel it and if it’s equal on both sides. Do light touch in the three areas of the face—CN V
21. Examine thyroid gland WITH and WITHOUT swallowing
22. Palpate lymph nodes of the neck and posterior occipital region
23. Ask patient to shrug their shoulders against resistance—CN XI
24. Ask patient to turn their head against resistance –CN XI

**CHEST EXAM**

“Now I’m going to perform a chest exam I’m going to start on the back. Is it okay if I undo your gown and expose your back?”

1. Inspect and palate spine on bare skin –“Any tenderness?”
2. Perform a fist percussion of the CVA bilaterally—“let me know if you feel any pain”
3. Check chest expansion –Ask patient to take deep breath
4. Percuss 6 fields bilaterally and symmetrically
5. Auscultate posterior lung fields—6 of them (3 on each side). Ask patient to breath in and then out
6. Auscultate lateral lung fields—4 of them (2 on each side). Ask patient to breath in and then out

“I’m going to tie you up back here. Now if its okay I’m going to unbutton your gown and expose your front side to do the rest of the chest exam”

1. Auscultate anterior lung fields—6 of them (3 on each side). Ask patient to breath in and then out
2. Tell patient they can breath normal now and listen to 4 heart sounds

BUTTON UP THE TOP OF THE GOWN

1. RAISE EXAMINATION TABLE TO 30 DEGREES and ask patient to lie down and turn their head (bilaterally) to examine their jugular veins (“I don't see any distention which is good”). DON'T FORGET TO PULL OUT LEG SUPPORT!
2. Feel for carotid pulse ON BOTH SIDES!

**ABDOMINAL EXAM**

LAY THE HEAD OF THE EXAM TABLE ALL THE WAY DOWN!!! GRAB THE DRAPE and cover the bottom half of the patient. “Now Im going to move onto the abdominal part of the exam. If its okay I’m going to lift up your gown and expose your abdomen and im going to pull your pants just down below your belly button.”

1. Auscultate all 4 quadrants before anything else.
2. Palpate—light first (“any discomfort?”) then deep (“any pain?”)
3. Palpate the liver edge—If it's a woman ask her to please lift up her gown and raise her right breast. Then take a deep breath and then feel (when the patient breaths in it pushes the diaphragm down as well as the liver)
4. Percuss the upper border of the liver
5. Take FEMORAL PULSES on BOTH SIDES

**UPPER EXTREMITY MUSCULOSKELETAL, REFLEXES, SENSORY**

1. Inspect hands, nails, ALL joints (fingers, wrists, elbow, and shoulder), palms
2. Palpate ALL joints (fingers, wrists, elbow, and shoulder)
3. Test range of motion
   1. of fingers (spread your fingers out, pull them close together, make a fist, move your thumbs)
   2. of wrists (bend your wrist down, bend it up, bend it inward keeping your elbows fixed, bend it outward keeping your elbows fixed)
   3. of elbow (flex your elbow (like your curling a dumbbell), let it go back down, hold your elbow close to your body and turn your palm down, then turn your palm facing up)
   4. of shoulder (flexion, extension, abduction, adduction, hands behind head—feel for your scapula, hands reach up from behind and feel for scapula)
4. Test strength
   1. of wrist—do both sides at once to check for symmetry (push against my resistance, pull against my resistance)
   2. of elbow—do both sides at once to check for symmetry (push against my resistance, pull against my resistance)
   3. of shoulder—do both sides at once to check for symmetry (push against my resistance, pull against my resistance)
5. Do the brachioradialis, bicep, and triceps reflexes
6. Do sensory on arm using a cotton ball. REMEMBER TO HAVE THE PATIENT CLOSE THEIR EYES! Then ask them to tell you if they feel it and if it’s equal on both sides.

**LOWER EXTREMITY MUSCULOSKELETAL, REFLEXES, SENSORY, AND PROPRIOCEPTION**

Ask patient to please take off their socks if they are wearing any

1. Inspect and palpate lower joints (toes, ankle, knee, and hip)
2. Test muscle strength of legs—do both at one time to compare strength (push against my resistance and pull against my resistance on the leg and thigh)
3. Do the Achilles, patellar, and Babinski (follow outside of foot) reflex
4. Check dorsalis pedis PULSE BILATERALLY! (“ask patient to raise their big toe and the pulse will be just lateral to the tendon”)
5. Check the posterior tibial pulse BILATERALLY (its on the inside of the foot right behind the medial malleolus of the tibia)
6. Ask the patient to CLOSE THEIR EYES. Moving their big toe tell them which way is up and down. Move the toe up and down a couple times and hold the toe in either the up or down position and ask the patient to tell you which way their toe is pointed. DO THIS BILATERALLY

Ask patient if they would like to put back on their socks if they were wearing them

**CEREBELLAR**

1. Ask patient to take one hand and rapidly move it from prone to supine as fast as they can. Then ask them to do the same thing to the other hand.
2. Ask patient to go back and forth touching your finger with their index finger and then touching their nose. (remember to move your finger around). DO THIS WITH BOTH OF THEIR FINGERS.
3. Ask the patient to take his/her heel and run it up and down the shin of their other leg. Do this with both heels.
4. Romberg’s Test. Ask patient to stand up FEET TOGETHER, EYES CLOSED. (I googled and their arms do not need to be out)